Application For Lead-Based Paint Certification – Individual - Prior Licensee

Department of Community Trade and Economic Development Lead-Based Paint Program 906 Columbia Street SW PO Box 42525 Olympia, Washington 98504-2525 360-586-LEAD (360-586-5323)

Cert. #		For Departn	nent use	only
	Cert	.#		
Issuance Date	Issua	nce Date		
Expiration Date	Expi	ration Date_		

Type of Certification Currently Held (Check as many as applicable) Risk Assessor Supervisor Project Designer Inspector Worker Fees: No fee required if you are currently licensed in Washington with the EPA. (This no fee provision is effective through October 15, 2004)								
Name:	Last	First						
Social Security Number (RF)			IVI.1.					
Social Security Number (REQUIRED BY LAW): / /								
Residence Mailing Address:	Number	Street	Apt. #					
	rvamber	Succi	Apt. II					
-	City	State	Zip Code					
-	Telephone #	FAX #						
_	Email Address							
Business or Firm Name:								
Firm Mailing Address:								
	Number	Street	Suite #					
-	City	State	Zip Code					
-	Telephone #	Mobile/Cellular #	FAX #					
Application Checklist Application completed and signed Two recent passport photos Copy of a valid EPA-issued certification for practice in Washington State								
-		AC 365-230 and the provision cation is complete and accura	ate to the best of my					